Fill	in this information to identify your c	ase:		
Deb	otor 1 Glenn E. Na	sk		
	otor 2			
Uni	ted States Bankruptcy Court for the	: EASTERN DISTRICT	OF PENNSYLVANIA	
Cas	se number <b>16-12798</b>			Check if this is:
(If kn	lown)			An amended filing
			A supplement showing postpetition chapter 13 income as of the following date:	
O	fficial Form 106I			MM / DD/ YYYY
So	chedule I: Your Inc	ome		12/15
sup <sub> </sub>	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.	are married and not filing wi	ng jointly, and your spouse is livith you, do not include information	and Debtor 2), both are equally responsible for ring with you, include information about your on about your spouse. If more space is needed, I case number (if known). Answer every question
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job,		■ Employed	■ Employed
	attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed
	employers.	Occupation	Crew Chief	hairdresser
	Include part-time, seasonal, or self-employed work.	Employer's name	American Airlines	Inspire Hair Studio
	Occupation may include student	Employer's address	4333 Amon Carter Blvd	

Part 2: Give Details About Monthly Income

or homemaker, if it applies.

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

Fort Worth, TX 76155

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If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$
3. Estimate and list monthly overtime pay.

3. +\$
4. Calculate gross Income. Add line 2 + line 3.

How long employed there?

2.	\$	4,050.00	\$	1,300.00
3.	+\$	0.00	+\$_	0.00
4.	\$	4,050.00	\$_	1,300.00

For Debtor 1

Avondale, PA

3 years

For Debtor 2 or non-filing spouse

Official Form 106I Schedule I: Your Income page 1

Debtor 1		Glenn E. Nask		(	Case number (if known)		wn)	16-12798				
					For Debtor 1				Debtor -filing s			
	Сор	y line 4 here	4.		\$_	4,050.	00	\$		300.00		
5.	List	all payroll deductions:										
	5a.	Tax, Medicare, and Social Security deductions	5a	1	\$	920.	nn	\$		200.00	<b>,</b>	
	5b.	Mandatory contributions for retirement plans	5b		\$ -		00	\$_		0.00		
	5c.	Voluntary contributions for retirement plans	5c		\$		00	\$_		0.00	_	
	5d.	Required repayments of retirement fund loans	5d		\$		00	\$		0.00		
	5e.	Insurance	5e	<del>)</del> .	\$	200.		\$		0.00		
	5f.	Domestic support obligations	5f.		\$	0.0	00	\$		0.00	)	
	5g.	Union dues	5g	J.	\$	24.0	00	\$		0.00	<u> </u>	
	5h.	Other deductions. Specify:	5h	1.+	\$	0.0	00	+ \$		0.00	)	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	1,144.0	00	\$		200.00		
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	2,906.	00	\$	1,	100.00	<u>)</u>	
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total										
		monthly net income.	8a	ì.	\$_		00	\$		0.00		
	8b.	Interest and dividends	8b	).	\$_	0.0	00	\$		0.00	<u>)                                    </u>	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80	<b>).</b>	\$	0.0	00	\$		0.00	)	
	8d.	Unemployment compensation	80		\$		00	\$		0.00	_	
	8e.	Social Security	8e	<del>)</del> .	\$		00	\$		0.00	_	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  Page ion a retionment income	8f.		\$_ \$		00	\$		0.00		
	8g. 8h.	Pension or retirement income	8g	). 1.+	\$ \$		00	—		0.00	_	
	OII.	Other monthly income. Specify:	01	1.+	Φ_	0.0	00	г <b>э</b>		0.00	<u>,</u>	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	5	\$	0.0	00	\$_		0.0	00	
10	Cald	culate monthly income. Add line 7 + line 9.	10.	\$		2,906.00 +	<b>Q</b>	11	00.00	- \$	4,006.00	
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_		2,900.00			100.00		4,000.00	
11.	11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  11. +\$ 0.00											
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines							12.	\$	4,006.00	
	_									Comb	ined ily income	
13.	Do y	/ou expect an increase or decrease within the year after you file this form No.	?									
	_	Yes Explain:										